	PATENT APPLICATION FEE DETERMINATION REC								Application or Docket Number						
	Effective December 16, 1991								920519						
-	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY			OR	OTHER T			
FOR NUM			BER FILED		NUMBER EXTRA			RATE		FEE]	RATE	FEE		
BASI	C FEE		·							\$ 345.00	OR		\$ 690.00		
TOTA	AL CLAIMS	2	6 minu	us 20 = 1	· 6			x \$1	0=		OR	x \$20 =	60100		
INDEPENDENT CLAIMS			5 min	minus 3 = * -				x 36			OR	x 72 =			
MULTIPLE DEPENDENT CLAIM PRESENT							1 1	+ 11	0 =	<u></u>	OR	+ 220 =			
* If the difference in column 1 is less then zero, enter "0" in column 2							ļ	TOTA	-		OR		250,00		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY				OTHER T			
ENT ≰		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY OFOR	PRESENT EXTRA		RATE	Ξ-	ADDI- TIONAL FEE	OR OR OR	RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	* 26	Minus	** 2	26		1[x \$10)=			x \$20 =			
AME	Independent	• 2	Minus	***	3	=][x- 36	=			x 72=			
	FIRST PRE	SENTATION OF N	MULTIPLE DE	EPENDEN	NT CLAIM][+ 110) <u>=</u>	1.3	OR	+ 220 =			
		(Column 1)		(Colu	mn 2)	(Column 3)	AD	TOTA DIT. FE			OR A	TOTAL DDIT. FEE			
DMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER HOUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE	AL	RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**	-	=	1[x \$10	=		OR OR	x \$20 =			
AMEN	Independent	*	Minus	***		=	\prod	x 36	=		OR	x 72 =			
f a name	FIRST PRE	SENTATION OF N	IT CLAIM][+ 110	=	,	OR	+ 220 =					
, 1. ,		(Column 1) (Colu				mn 2) (Column 3)			AL EE		OR	TOTAL DDIT: FEE			
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE	OR OR OR	RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=][x \$10	=			x \$20 =			
	Independent	*	Minus	***		=][x 36 =	_			x 72 =			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ 110	=		OR	+ 220 =			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ADDIT, FEE												TOTAL DIT. FEE			
*** If th	ne "Highest Num	nber Previously Pa ber Previously Pai	aid For IN TH	IIS SPACE	E is less tha	an 3, enter "3".				ppropriate b					

Form PTO-875 (Rev. 12-91)